

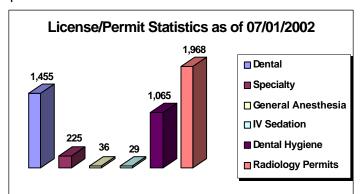
The Dental Digest

Mississippi State Board of Dental Examiners

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The Mississippi State Board of Dental Examiners is charged with the responsibilities of examining, licensing, registering, and regulating dentistry and dental hygiene to ensure competency and ethics among all dental professionals in the State of Mississippi, for the ultimate goal of safeguarding and enhancing the health and welfare of the citizens of this State. As such, the Board is neither affiliated with nor functions as a subsidiary of any private or professional organization.

elcome to the July 2002 edition of the Dental Digest. The primary focus of this edition will be those changes made to the Mississippi Dental Practice Act effected during the 2002 Legislative Session. We also have information concerning amendments to Board Regulation 29 (Administration of Anesthesia), and this Regulation is featured in our "Regulation Highlight" section. Latebreaking HIPAA information and tips for avoiding complaints also are provided for your information and review. Don't forget to review our "Things to Note" section, as this section contains a variety of information useful to our licensees and permit holders. Please remember, too, that the Board's forms, laws, regulations. newsletters, examination databases, statistics, frequently asked questions, etc., may be found on our web site (http://www.msbde. state.ms.us). Enjoy the newsletter, and, as always, feel free to contact our office if you have any questions.



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s part of its legislatively-mandated regulatory responsibilities, the MSBDE must enforce the laws of this State and enact any regulations necessary to ensure consistent and ethical compliance with these laws. Accordingly, when deemed appropriate and as a means of establishing uniform policies for all dental professionals in Mississippi, the MSBDE enacts and/or amends regulations. Whenever a regulation is enacted or amended, it must be filed immediately with the Mississippi Secretary of State and is not considered approved until thirty (30) days after filing. At that time, a "final filing" must be effected with the Mississippi Secretary of State, and the adopted or amended regulation becomes final thirty (30) days after that filing date.

As a regular feature of the <u>Dental Digest</u>, the MSBDE highlights regulations that have been amended/enacted. Since the September 2001 newsletter, the MSBDE has amended Regulation 29. This regulation has been reprinted in its entirety, and a synopsis of the amendments has been provided for your review, as well. A fee of \$10.00 per copy is charged for bound copies of the <u>Mississippi Dental Practice Act</u> and the Board's rules and regulations; however, copies of individual regulations may be obtained by calling or writing the Board's office. Also, copies of the Board's laws and regulations may be obtained on its web site (http://www.msbde.state. ms.us) either in Adobe Acrobat or HTML format. Just click on the "Laws & Regulations" button and select how you wish to view or print a current copy of the Board's laws and regulations.

BOARD REGULATION NUMBER 29 ADMINISTRATION OF ANESTHESIA

On December 20, 2001, the Board amended and restructured this regulation. The amendments include, but are not limited to, adding the ADA's current definitions of anesthesia, requiring that all drugs utilized by dentists for anesthesia be utilized in accordance with the manufacturer's guidelines and FDA-approved labeling, increasing the minimum number of didactic hours to sixty (60) to qualify for an IV permit, stipulating that Board members may request the

participation in site visits of licensees currently holding anesthesia permits, etc. The entire regulation is being reprinted in this newsletter.

Purpose: Pursuant to <u>Miss. Code Ann.</u> § 73-9-13, to promulgate rules for the administration of anesthesia in the dental office to allow dentists to provide patients with the benefits of anxiety and pain control in a safe and efficacious manner.

- 1. Definitions of Terminology Used Herein
 - a. <u>Analgesia</u>. This is the diminution or elimination of pain.
 - b. Anxiolysis. This is the diminution or elimination of anxiety.
 - Combination Inhalation-Enteral Conscious Sedation (Combined Conscious Sedation). This is conscious sedation using inhalation and enteral agents. When the intent is anxiolysis only, and the appropriate dosage of agents is administered, then the definition of enteral combination inhalation-enteral conscious sedation (combined conscious **Nitrous** sedation) does not apply. oxide/oxygen when used in combination with sedative agents may produce anxiolysis, conscious or deep sedation or general anesthesia.
 - d. Conscious Sedation. This is a minimally depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command and that is produced by a pharmacological or non-pharmacological method or a combination thereof. Parenteral conscious sedation may be achieved with the administration of a single agent or by the administration of more than one agent. In accord with this particular definition, the drugs and/or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely. Further, patients whose only response is reflex withdrawal from repeated painful stimuli would not be considered to be in a state of conscious sedation.
 - e. <u>Deep Sedation</u>. This is an induced state of depressed consciousness accompanied by partial loss of protective reflexes, including the inability to continually maintain an airway independently and/or to respond purposefully to physical stimulation or verbal command, and is produced by a pharmacological or non-pharmacological method or a combination thereof.
 - f. General Anesthesia. This is an induced state of unconsciousness accompanied by partial or complete loss of protective reflexes, including the inability to continually maintain an airway independently and respond purposefully to physical stimulation or verbal command, and is produced by a pharmacological or non-pharmacological method or a combination thereof.

- g. Intravenous or Parenteral Conscious Sedation.

 A depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command, produced by a pharmacologic method.
- h. <u>Local Anesthesia</u>. This is the elimination of sensation, especially pain, in one part of the body by the topical application or regional injection of a drug.
- i. <u>Nitrous-Oxide Inhalation Conscious Sedation</u>. This is inhalation conscious sedation.



Pictured top left to bottom right for the March 2002 mid-winter meeting of the American Association of Dental Examiners: Charles E. Leonard, D.D.S., Mark H. Kennedy, D.D.S., C. Wyck Neely, D.D.S., Catherine L. Gatewood, R.D.H., and D. Hal Jones, D.M.D.

- 2. General Guidelines for Using Anesthesia
 - a. Any person licensed to practice dentistry in the State of Mississippi shall be authorized to use anesthesia in accordance with the provisions of this section.
 - b. All drugs utilized by licensed dentists for anxiolysis, analgesia, conscious sedation, deep sedation, and general anesthesia should be selected and utilized in accordance with the drug manufacturer's guidelines as set forth in Food and Drug Administration (hereinafter referred to as "FDA") approved labeling, including, but not limited to, indications of usage, dosage amounts, and safety requirements for each drug so utilized.
 - c. A licensed dentist may employ or work in conjunction with a qualified anesthesiologist or Certified Registered Nurse Anesthetist (hereinafter referred to as "CRNA") who is a member of the anesthesiology staff in an accredited hospital, provided that such anesthesiologist or CRNA remains on the premises of the dental facility until any patient given a general anesthetic regains consciousness and is discharged.

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- d. When a CRNA is permitted to function under the supervision of a dentist, administration of deep sedation/general anesthesia and/or intravenous or parenteral conscious sedation by a CRNA shall require the operating dentist to have completed training in deep sedation/ general anesthesia and/or intravenous or parenteral conscious sedation commensurate with these guidelines.
- e. Appropriate safety training and equipment for each drug utilized will be required.

3. Types of Anesthesia

- a. <u>General Anesthesia</u>. No licensed dentist shall use general anesthesia in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board. The issuance of a permit for general anesthesia shall include the privileges of administering intravenous or parenteral conscious sedation in accordance with the provisions of this section.
- b. Intravenous or Parenteral Conscious Sedation.
 No licensed dentist shall use intravenous or parenteral conscious sedation in his/her office on an outpatient basis for dental patients, unless such dentist possesses a permit of authorization issued by the Board.
- c. <u>Local Anesthesia</u>. All licensed dentists are herein authorized to use local anesthesia.
- d. Nitrous-Oxide Inhalation Conscious Sedation.
 A licensed dentist may employ or use nitrousoxide inhalation conscious sedation on an outpatient basis for dental patients without making
 application to the Board, provided such dentist
 meets the criteria set forth in Section 4.c.



Pictured top left to bottom right for the annual dinner meeting of the American College of Dentists: Jeffrey William Overstreet, D.M.D., Angela Lee Neely Overstreet, D.M.D., C. Wyck Neely, D.D.S. (10/2002 inductee), Gene Norris Howell, Jr., D.D.S., William Toler Buchanan, D.D.S., R. Patrick Welsh, D.D.S. (10/2002 inductee) and wife Jean, and Dr. Buchanan's wife Noni.

- 4. Criteria and Application for Anesthesia Permits
 - a. <u>General Anesthesia</u>. A permit is required prior to administration of general anesthesia, and in order to receive such permit, the dentist must do the following:
 - (1) Apply on a prescribed application form to the Board;
 - (2) Submit the specified application fee;
 - (3) Produce evidence of a current Advanced Cardiac Life Support (hereinafter referred to as "ACLS") certificate, or a certificate from a Board-approved course; and
 - (4) Provide evidence of one or more of the following:
 - (a) Completion of an advanced training program in anesthesia and related academic subjects beyond the undergraduate dental curriculum that satisfies the requirements described in Part II of the American Dental Association's (hereinafter referred to as "ADA") "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry" at the time training was commenced.
 - (b) Completion of an ADA-accredited postdoctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage deep sedation/general anesthesia, commensurate with these guidelines.
 - b. Intravenous or Parenteral Conscious Sedation.
 A permit is required prior to administration of intravenous or parenteral conscious sedation, and in order to receive such permit, the dentist must do the following:
 - (1) Apply on a prescribed application form to the Board;
 - (2) Submit the specified application fee;
 - (3) Produce evidence of a current ACLS certificate, or a certificate from a Board-approved course; and
 - (4) Provide evidence of one or more of the following:
 - (a) Completion of formal training, sponsored by or affiliated with a university, teaching hospital, or other facility approved by the Board or part of the undergraduate curriculum of an accredited dental school, in the use of intravenous or parenteral conscious sedation, and certification by the institution wherein the training was received to be competent in the administration of intravenous or parenteral conscious sedation. Such certification shall specify

- the type, number of hours, and length of training. The minimum number of didactic hours shall be sixty (60), and the minimum number of patient contact hours shall be twenty (20). The preceding is necessary for recognition of the formal training program.
- (b) Completion of a comprehensive training program in parenteral conscious sedation that satisfies the requirements described in Part III of the ADA's "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry" at the time training was commenced.
- (c) Completion of an ADA-accredited postdoctoral training program, which affords the comprehensive and appropriate training necessary to administer and manage parenteral conscious sedation, commensurate with these guidelines.
- c. <u>Nitrous-Oxide Inhalation Conscious Sedation</u>. No permit is necessary; however, the dentist must satisfy one or more of the following criteria prior to administration of nitrous-oxide inhalation conscious sedation:
 - (1) Completion of not less than a two-day course of training as described in the ADA's "Guidelines for Teaching the Comprehensive Control of Anxiety and Pain in Dentistry," or its equivalent.
 - (2) Completion of training equivalent to that described above while a student in an ADA-accredited undergraduate dental school program.
- 5. Facilities Wherein Anesthesia Is Administered
 - a. All facilities wherein any anesthesia is administered must be properly equipped for the administration of anesthesia and staffed with a supervised team of auxiliary personnel capable of reasonably assisting the dentist with procedures, problems, and emergencies incident thereto. The adequacy of the facility and competence of the anesthesia team shall be determined by the Board.
 - b. The Board adopts the standards regarding the equipment within a facility as set forth by the American Association of Oral and Maxillofacial Surgeons (hereinafter referred to as "AAOMS") in the Office Anesthesia Evaluation Manual, latest edition, as the standards by which each dentist administering general anesthesia or intravenous or parenteral conscious sedation must meet. Certification of offices by AAOMS as meeting the standards adopted constitutes a prima facie showing that the dentist meets the standards. Copies of the Office Anesthesia Evaluation Manual are available from AAOMS at 9700 West Bryn Mawr Avenue, Rosemont, IL 60018-5701.

- c. Any dentist administering general anesthesia or intravenous or parenteral conscious sedation at a facility other than that dentist's own office or facility must ensure that the proper equipment and personnel as required above are present.
- Site Visits Pertaining to General Anesthesia and Intravenous or Parenteral Conscious Sedation Permits
 - a. Prior to the issuance of such permits the Board shall conduct an on-site inspection of the facility, equipment, and personnel to determine if, in fact, the aforementioned requirements have been met. This evaluation shall be carried out in a manner prescribed by the Board, and the cost thereof shall be included in the anesthesia permit application fee. If possible, a Board member may select a Mississippi licensed dental professional who is currently permitted to administer anesthesia to accompany that Board member on any required site visit.



Top left to bottom right at February 2002 MDA District 3 annual meeting: Richard Fabian McCarthy, D.D.S., Charles Lamar Jones, D.D.S., Melissa Clinton Beech, R.D.H., Charles E. Greer, D.D.S., Robin Harmon Walley, D.M.D., J. Dan Stringer, Jr., D.D.S., and Artis E. Knight, D.D.S.

- b. If the results of the initial evaluation are deemed unsatisfactory, the applicant may request another review.
- 7. Advanced Cardiac Life Support and Cardiopulmonary Resuscitation
 - a. Any dentist using general anesthesia or intravenous or parenteral conscious sedation shall at all times be ACLS certified or hold a certificate from a Board-approved course, and his/her auxiliary personnel must meet the requirements for Cardiopulmonary Resuscitation (hereinafter referred to as "CPR") as set forth in Board Regulation 45.
 - A dentist utilizing nitrous-oxide inhalation conscious sedation and his/her auxiliary personnel must meet the requirements for CPR as set forth in Board Regulation 45.

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- 8. Renewal of General Anesthesia and Intravenous or Parenteral Conscious Sedation Permits
 - a. Any dentist holding a permit of authorization issued by the Board shall be subject to review, and such permit must be renewed at the same time as the dentist renews his/her Mississippi dental license.
 - b. The Board shall, in accordance with its laws, rules, and regulations, together with the appropriate and required information and renewal fee, renew the general anesthesia or intravenous or parenteral conscious sedation permit, unless the holder is informed in writing that a re-evaluation of credentials and/or facilities is to be required. In determining whether such reevaluation is necessary, the Board shall consider such factors as it deems pertinent, including, but not limited to, patient complaints and reports of adverse occurrences.
 - c. At the time the dentist renews his/her general anesthesia or intravenous or parenteral conscious sedation permit, he/she shall submit proof of current ACLS certification and current CPR certification for all dental auxiliaries who have direct patient care responsibilities.

9. Penalties for Non-Compliance

Violating the provisions of this regulation shall subject the dentist to disciplinary action, after a hearing, as provided by the Mississippi laws pertaining to the practice of dentistry.

Regulation Twenty-Nine adopted by the Mississippi State Board of Dental Examiners June 4, 1987; amended May 4, 1990; amended September 25, 1992; amended December 4, 1992; amended December 8, 1995; amended February 9, 1996; amended July 21, 2000; amended December 7, 2001.





any changes were effected to the Mississippi Dental Practice Act, §§ 73-9-1 through 73-9-117, during the 2002 Legislative Session. The Board proposed changes to the Act as part of its Sunset review, and the Board wishes to express its deep appreciation for the support and tireless efforts of our State dental and dental hygiene associations and various legislators toward ensuring adoption of these critical changes to our laws. These legislative changes will be made available on the Board's web site in both HTML and Adobe Acrobat formats, and until that time, the following is a summary of amendments passed by the 2002 Legislature (also available on the Board's web site in Adobe Acrobat format).

Miss. Code Ann. § 73-9-3

Subsection (6) was amended to add "dental hygiene" to the applicants taking licensure examinations under the Board's supervision.

 Outdated language was deleted, such as "instructors" and "professors," and the word "faculty" was inserted in all appropriate subsections.

The licensure requirement was removed for "residents" participating in Mississippi Board-approved and ADA-accredited dental residency programs, inasmuch as the Board considers these residents as quasi-students during their tenure in these residency programs.

 Subsection (8) to was amended to indicate that offsite training programs for dental and dental hygiene students shall not be carried on for profit.

Miss. Code Ann. § 73-9-7

 This section was amended to require that dentist and dental hygienist Board members be licensed and actively practicing for five (5) years prior to their appointment, and to ensure that no Board member appointments violate the current ethics laws and regulations.

The terms of all Board members were changed from four-year terms to six-year, non-consecutive terms. However, Board members may be re-appointed to the Board after expiration of six years. Unlike other State regulatory boards, this Board administers annual clinical licensure examinations which are extremely complex and technical in nature, and which require two to three years of Board member participation before optimum administrative efficiency is achieved. Thus, by effecting six-year terms, the Board will ensure this technical and educational consistency in the administration of its annual licensure examinations.

The Board determined, pursuant to its October 26, 2001 minutes, that only those Board members concluding their first four-year term after the new six-year terms take effect will be eligible for re-appointment to a new six-year term.

Miss. Code Ann. § 73-9-9

 This section was amended to indicate that a Board member who fails to attend two (2) consecutive meetings "without just cause" may be removed from the Board by the Governor.

Miss. Code Ann. § 73-9-11

This section was amended to stipulate that the oaths of office certificates for newly appointed Board members shall be filed fifteen (15) days after their execution of these certificates, versus fifteen (15) days after their appointment.

Miss. Code Ann. § 73-9-13

 This section was amended to stipulate that, in addition to its current president and secretary, the Board will elect a vice-president each year. Also, only dentist members may serve in the capacities of president or vice-president.

of president or vice-president.
 Inasmuch as the Board has an office and executive director, certain duties were noted for

both the Board secretary and executive director in the offices of the Board.

Redundant language covered by the Public Access to Public Records Law and Miss. Code Ann. § 73-9-7 (annual balloting of dentists) was deleted.

Language was inserted to indicate that the Board's duties and powers encompass all types of licenses and permits issued by the Board, not just dental

and dental hygiene licenses.

Language referencing "annual renewal" was deleted, inasmuch as at some point in the future the Board is considering changing, via regulation, its annual license renewal to a bi-annual license re-

Language was inserted in subsection (q) to ensure that deputy examiners, in addition to "monitoring" the licensure examinations, also may "administer" these same examinations. Additionally, other language throughout the entire section was streamfined and clarified.



Grading at the 2002 licensure examinations, left to right: C. Wyck Neely, D.D.S., Thomas L. Jones, Jr., D.D.S., and William T. O'Brien, III, D.D.S.

Miss. Code Ann. § 73-9-15

The word "personal" was removed, as it pertains to investigations and examinations, inasmuch as the Board conducts investigations and examinations only as they relate to a licensee's professional practice.

Miss. Code Ann. § 73-9-19

- Language was changed throughout this section to indicate that registration and re-registration pertain to all types of licenses and permits issued by the Board.
- The language was changed to indicate that licensees shall notify the Board within thirty (30) days of a change of office or residence address; otherwise, the licensee may be assessed a penalty not to exceed that noted in Miss. Code Ann. § 73-9-43.
- The language stipulating an annual renewal period was changed to indicate that licensure renewal will be established by the Board via regulation. This will allow the Board the flexibility to move to a biannual license renewal once procedures have

been established and sufficient funding exists in its

State Treasury account.

At this time, however, the Board is considering adopting a regulation stipulating that the current annual renewal be changed from "60 days prior to September of each year" to "60 days prior to November of each year," in effect changing renewal to begin September 1 and run through October 31 each year, with a two-month penalty phase following the initial renewal period. After the expiration of the two-month penalty phase, all licenses and permits not renewed will be voided on January 1 each year for a failure to re-register. Again, annual renewal will continue in this fashion until all intricacies of changing to a bi-annual renewal can be accomplished.

The requirement that all licenses be recorded in the county of residence was deleted, inasmuch as this no longer is necessary for the proper recordation of the Board's licenses. Where once there was no accurate, electronic method of tracking licenses and permits issued by the Board, now the Board has an extremely sophisticated database for issuing and tracking its licenses and

permits.

Miss. Code Ann. § 73-9-23

Various subsections were amended to stipulate the correct names of the commissions and councils of the American Dental Association. Also, language was inserted which will provide for any name changes to these commissions and/or councils.

Language was inserted which indicates that, at the Board's discretion, a portion of the licensure examination will be conducted on live human sub-

jects.
Subsection (8) was amended by indicating that, although the Board accepts the written examinations administered by the Joint Commission on National Dental Examinations, it also may administer such other "written" and practical examinations as the Board deems necessary.

Miss. Code Ann. § 73-9-24

- Various subsections were amended to stipulate the correct names of the commissions and councils of the American Dental Association. Also, language was inserted which will provide for any name changes to these commissions and/or councils.
- Subsection (1)(m)(1) was amended to require that reports be obtained not only from the National Practitioner Data Bank (NPDB), but also from the Healthcare Integrity and Protection Data Bank (HIPDB), to ensure compliance with federal law.

Miss. Code Ann. § 73-9-25

Language was inserted to indicate that the Board not only will hold annual meetings, but also will hold other meetings as it deems appropriate, i.e., inserting the words "at least" before "annually" in the second line. Inasmuch as the Board accepts the written examinations currently administered by the Joint Commission on National Dental Examinations, and the subjects covered by these written examinations, the language noting the subjects of "written" examinations was deleted.

Language was added which stipulates that licensure examinations for both dental and dental hygiene licenses shall cover the subjects taught in the recognized schools of dentistry and dental hygiene.

Miss. Code Ann. § 73-9-27

- Since the Board also issues dental and dental hygiene licenses by credentials, language was inserted to indicate that the signatures of Board members will be affixed to all dental and dental hygiene licenses, not just those issued by examination.
- Language was inserted to provide that the executive director, in addition to the Board secretary, may issue certified copies of licenses and collect the appropriate fees.

Miss. Code Ann. § 73-9-28

The duties of the secretary and executive director were clarified insofar as the receipt of fees and applications is concerned.

Miss. Code Ann. § 73-9-29

- This section was amended to provide for any name changes to the commissions and/or councils of the American Dental Association.
- Redundant language concerning the specialty license application fee was deleted, and language has been provided which refers to the fee stipulated in Miss. Code Ann. § 73-9-43.

Miss. Code Ann. § 73-9-33

This section was repealed in its entirety, since it no longer is necessary for the county circuit clerks to keep a record of the licenses issued by the Board. At one time this may have been necessary for a proper recordation of licenses, but the Board now has a very sophisticated database capable of properly recording and tracking all licenses and permits issued by the Board.

Miss. Code Ann. § 73-9-35

In lieu of the repeal of Miss. Code Ann. § 73-9-33, language was removed which referenced the recording of licenses.

Miss. Code Ann. § 73-9-41

- This section was amended to specifically stipulate that the unlicensed practice of dentistry and/or dental hygiene not only pertains to individuals formerly licensed by the Board, but also to individuals who never have been licensed by the Board.
- Language was inserted to note that individuals may not practice or offer to practice dentistry or dental hygiene once a license has been voided for
- failure to re-register.
 Certain grammatical changes were made in subsections (2)(a) through (c).
 In subsection (6), the words "temporary permit" were deleted, inasmuch as the Board does not issue temporary permits or licenses.



Board member Mark H. Kennedy, D.D.S. grading during the 2002 licensure examination.

Miss. Code Ann. § 73-9-43

- Language was added to clarify the duties of the executive director insofar as the collection of fees is concerned.
- All references to "annual" renewal fees were deleted, inasmuch as the Board is considering changing its renewal from "annual" to "bi-annual" once the intricacies of this changeover have been accomplished and sufficient funding exists in the Board's special fund account.
- References to a third-month penalty phase were removed, since, at this time, the Board is considering adopting a two-month penalty period prior to licenses being voided for a failure to reregister.
- Certain statutory maximum fees were increased which were not increased during the 2000 Legislative Session, e.g., specialty license renewal, general anesthesia permit renewal, and IV sedation permit renewal.
- was deleted which allowed an Language exemption from licensure renewal fees for all dentists over the age of seventy (70). The Board consistently and increasingly loses revenue from this ever-increasing licensee population, e.g., \$25,000 plus for the 2001-2002 renewal period alone; therefore, this change was necessary to ensure the continued financial stability of the Board.
- Language referencing the 90-day penalty period was deleted, since the Board is proposing a 60day penalty period for licensure renewal in Miss. Code Ann. § 73-9-19.

Language was added to stipulate that this section applies to all license and permit holders of the Board, not just to dentists and dental hygienists.

Redundant and/or archaic language now covered by other sections of the Mississippi Code was deleted to ensure consistency with these other Code sections.

In subsection (5), the remuneration for administering all initial and re-take licensure examinations was changed to \$900 per day for the Board secretary and \$700 per day for all other Board members. The Board feels this is a more equitable means of reimbursing Board members for their participation in these licensure examinations.

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Miss. Code Ann. § 73-9-45

 The word "shall" was replaced by the word "may" in this section, which allows greater flexibility for licensees insofar as the investigation of complaints is concerned.

Miss. Code Ann. § 73-9-47

 The duties of the executive director were clarified insofar as the preservation of the Board's official actions and votes are concerned.

Miss. Code Ann. § 73-9-49

 The duties of the executive director were clarified insofar as the submission of annual reports to the Board is concerned. Also, the requirement that these annual reports be filed with the Governor was deleted.

Miss. Code Ann. § 73-9-57

 The penalties for the illegal practice of dentistry and dental hygiene were increased from a minimum of \$500 and maximum of \$1,000 to a minimum of \$2,000 and a maximum of \$5,000.

Miss. Code Ann. § 73-9-61

 A new subsection (11) was added which stipulates that this section not only pertains to dental and dental hygiene license holders, but also to holders of all licenses and permits issued by the Board.

Miss. Code Ann. § 73-9-63

- Language was inserted to clarify the duties of the executive director insofar as the filing of complaints is concerned.
- Language was deleted regarding the transmission to the accused of all papers "filed" with the Board. Use of the word "filed" is ambiguous, and satisfactory provisions already exist for the release of proposed evidence and exculpatory materials.
- Language was added which requires the Board to transmit all notices of hearing via certified or registered mail, with return receipt requested. The Board already handles its notices in this manner, but feels that this is an additional due process requirement it should undertake on behalf of licensees.
- Language was added which stipulates that this section not only pertains to dental and dental hygiene license holders, but also to holders of all licenses and permits issued by the Board.

Miss. Code Ann. § 73-9-65

- Language was inserted to stipulate that a licensee may appeal any disciplinary action by the Board, not just those actions involving license suspensions or revocations. This provides additional due process for licensees.
- Language was deleted which requires filing license suspensions, revocations, and reinstatements with the circuit clerk, inasmuch as <u>Miss. Code Ann.</u>

- § 73-9-33 was repealed, as it regards filing licenses with the circuit clerk.
- Language was added to provide an appeal venue for licensees who reside outside the State of Mississippi. This venue has been established as the Chancery Court of the First Judicial District of Hinds County, Mississippi.
- Language was added which stipulates that this section not only pertains to dental and dental hygiene license holders, but also to holders of all licenses and permits issued by the Board.

Miss. Code Ann. § 73-9-67

This section was repealed altogether, inasmuch as several other State regulatory agencies, similar to the Board, no longer have a Sunset Review provision. These agencies include, but are not limited to, the Board of Architecture, Board of Medical Licensure, Board of Nursing, and Board of Public Accountancy.

Miss. Code Ann. § 73-9-107

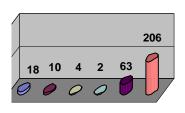
 A new subsection (6) was added which stipulates that all patient records, investigative reports, and other documents in the possession of the examining committee shall remain confidential and exempt from disclosure, unless so ordered by the court. Also, all sources of information shall remain anonymous when so requested.

Miss. Code Ann. § 73-9-113

A new subsection (3)(d) was added which stipulates that it may impose cost assessments or monetary penalties pursuant to the provisions of Miss. Code Ann. § 73-9-61.

Licenses and Permits Issued 10/01/2001 through 07/01/2002

□ Dental
□ Specialty
□ General Anesthesia
□ IV Sedation
□ Dental Hygiene
□ Radiology Permits







The following article appeared in a recent newsletter published by the Oregon Board of Dentistry, and the Mississippi State Board of Dental Examiners feels this same information would be quite useful for Mississippi's licensees. Therefore, we have reprinted portions of this article.

y law, the Board is required to open a file and conduct an investigation of every complaint it receives. Many complaints may be avoided

with clear communication and good patient relations. The following are a few tips that are worth reviewing regularly and which you may find useful in preventing complaints being filed by frustrated patients.

➡ Train front-office personnel in providing information to your current and potential patients in a friendly and courteous manner. Be sure your personnel understand the importance of confidentiality. Also, any discussions about fees should include caveats as to any additional services which may need to be performed. For instance, if a potential patient calls wanting to know the cost of an extraction, the caller should also be advised that there may be other services and fees required (e.g., examination and x-rays).

Provide patients with a written copy of your office procedures, including fees, payment expectations, insurance filings, management of pediatric patients, cancellations, and patient re-

sponsibilities.

Be specific with patients regarding the treatment plan and procedures that you will be following, as well as the meaning of various

Document in the patient record that you have discussed with the patient the treatment plan, various options, and risks, and that you have answered the patient's questions. Do not perform any procedure without the permission of the patient, parent, or guardian.

Pre-authorize treatment to be performed with the patient's insurance company prior to performing the procedure, and share the outcome of the authorization with the patient before be-

ginning treatment.

Document all procedures performed, anesthesia administered, x-rays taken, treatment complications, etc., in the patient record. If it isn't documented – it didn't happen! Documentation is your best defense. No one has ever been disciplined by the Board for overdocumenting.

If in doubt about your diagnosis or treatment plan, consult with a colleague or a specialist.

If a patient is dissatisfied with the treatment received, or the outcome of this treatment, discuss these concerns personally and immediately with the patient. Do not be defensivelisten to the patient's concerns and work with him/her for a mutually acceptable outcome.

Delegate to dental hygienists and dental assistants only those functions they are legally

permitted to perform.

Make sure everyone in your practice who is required to have a license or permit has the appropriate, current license or permit, and that licenses and permits are prominently posted where patients can see that these licenses and permits are current. If a license or permit has expired, not only can the holder of the license/permit be disciplined, but also the dentist can be disciplined for allowing an unlicensed person to practice.

person to practice.
Graduation from a dental or dental hygiene school accredited by the American Dental Association is only the starting point in your correct. Continuing education is important to career. Continuing education is important to your professional competency. The Board requires that dentists take 40 hours and dental hygienists 20 hours of continuing education every 2 years. Be familiar with all continuing education guidelines (Board Regulation 41), as well as all other Board requirements.

As always, the staff of the Mississippi Board is happy to assist you. If you have any questions, please feel free to call us. Also, don't forget about the Board's web site at http://www.msbde.state.ms.us.



ince the September 2001 Dental Digest, the Board has received additional information from Ms. Ms. Gayle Lowery, HIPAA Coordinator, Office of the Governor, Division of Medicaid, concerning the quickly approaching deadlines associated with this federal law. For instance, if you do any electronic filing, your forms must be HIPAA compliant on or before **OCTOBER 2003**. If you feel you need additional time to ensure HIPAA compliance, you must file for an extension no later than OCTOBER 15, 2002; otherwise, you will be considered to be in violation of HIPAA. All licensees are advised to file for an extension AS SOON AS POSSIBLE so that you will not be considered to be in violation of HIPAA. You may file for an extension via the Internet at http://www. cms.gov/hipaa/hipaa2/ascaform.asp, and submit your request for an extension in conjunction with the October 2003 deadline. You will receive an electronic confirmation that your request has been submitted, and you should maintain this confirmation in your HIPAA file.

HIPAA is an extremely complicated law, and you should bear in mind that many activities in your office may have a potential impact on patient privacy issues (e.g., billing, openly visible computer monitors, consent forms, release of records forms, etc.). Authorization forms may need to be designed to meet the specific instance, versus having blanket authorization forms. Furthermore, to ensure compliance with HIPAA privacy issues, you may not be able to leave detailed telephone messages with anyone other than the patient without a prior consent form! Your HIPAA privacy policies and procedures must be clearly and visibly posted in your offices, and patient privacy information must be protected at all times.

Please contact Ms. Gayle Lowery at 601-359-6846 or edgbl@medicaid.state.ms.us if you have any questions or concerns regarding HIPAA compliance. Once sample forms have been developed, Ms. Lowery will submit these forms to the Board so that we may make them available on our web site for use by our licensees. Please remember to make HIPAA compliance a priority for your practice.





2002 dental licensure examination candidates completing typodont procedures.



Pursuant to the December 2001 amendment to Board Regulation 29 (Administration of Anesthesia), licensed Mississippi dentists should note that any drug used outside the scope of Food & Drug Administration (FDA) guidelines is not sanctioned by the Board. Please refer to Section 2.b. of Board Regulation 29 for additional information.

At its January 11, 2002 Board meeting, the Board determined that only licensed Mississippi dentists may perform registrations with the CEREC wands. Accordingly, this procedure must not be delegated to dental auxiliaries. For additional information regarding procedures which should not be delegated to dental auxiliaries, please refer to Board Regu-

Remember that the Board conducts an annual random continuing education compliance audit. All continuing education records should be maintained a minimum of three (3) years from the date of course attendance, and licensees should refer to Board Regulation 41 for information as to approved continuing education sponsors and types of acceptable continuing education. If you do not receive an audit form, you do not need to submit continuing education information to the Board, unless you have been requested to do so due to a disciplinary action. Many dentists who have received audit forms have mistakenly submitted continuing education information for their licensed dental hygienists. If you are a dentist, and you re-Remember that the Board conducts an annual rancontinuing education information for their licensed dental hygienists. If you are a dentist, and you receive an audit form, you only need to submit continuing education course information for yourself. Alternatively, if you are a dental hygienist, and you did not receive an audit form, you do not need to submit continuing education course information if your employing dentist received an audit form. If you have any questions regarding the annual continuing education compliance audit or Board Regulation 41, please do not hesitate to contact the Board's office. Licensed dentists are encouraged to contact the Board or visit the Board's web site to determine the current license/permit status prior to employing dental auxiliaries, as well as to make a periodic check to determine if current employees have renewed their dental hygiene licenses or radiology permits. Do not simply have the potential employee present a permit or a copy of a dental hygiene or dental assisting diploma. Always ask to see the current white certification card or the wallet certification card. Just because a dental auxiliary has graduated from an accredited program does not mean that the auxiliary has a license/permit issued by the Board to practice in the State of Mississippi. Additionally, dental assistants may not administer radiographs without first having a current, valid radiology permit issued by the Board. The Board has found numerous instances of dental assistants who have graduated from programs accredited by the American Dental Association and who believe that their mere graduation from this program allows them to administer radiographs. This is not the case. Dental assistants, regardless of education, absolutely must not administer radiographs without first obtaining the requisite radiology permit from the Board. For additional questions regarding radiology permits, please refer to Board Regulation 25 or call the Board office, and we will be happy to assist you.

If you are a dental assistant who has attended a Board-approved radiology seminar, you only have ninety (90) days from the date of the seminar to submit your application and fee to the Board office to receive a radiology permit. Until you have received a radiology permit, you are prohibited from administering radiographs as part of your dental assisting duties. If your application is received more than ninety (90) days from the date of the Board-approved seminar, your application will be returned, and you must successfully complete another Board-approved radiology seminar prior to receiving a radiology permit receiving a radiology permit.

After receipt of your renewal form, please carefully read and follow all instructions. During each renewal season, the same mistakes appear to be made time and time again. A few are highlighted here.

(1) Ensure that you sign your renewal form and indicate the number of months you practiced in the State of Mississippi during the prior renewal period.

(2) If you are writing a check for several renewals, please ensure you have correctly calculated all monies due, and make all checks payable to the "Mississippi State Board of Dental Examiners" and NOT the "Mississippi Dental Association.'

(3) Only STREET addresses are acceptable for practice and home locations; therefore, please do not list a "post office box" as your home or office practice address.
(4) If you work at more than one location, you must provide ALL locations at which you work.
(5) Dental auxiliaries must provide the names of ALL dentists for whom they work, regardless of whose name appears on their paychecks.
(6) Dentists must provide the names of ALL dental auxiliaries whose services they utilize, regard-

less of whether the dentist signs their paychecks.
(7) Since thousands of renewals are being pro-

(7) Since thousands of renewals are being processed in an extremely short period of time by a very small staff, any revisions to your renewal form should be **TYPED** to ensure accuracy on the part of the Board. If you do not have a typewriter, please use your computer's word processing program to type the information on a separate sheet of paper and attach that sheet of paper to your renewal form.

Don't forget to immediately submit all name, address, employer, etc., changes to the Board either via United States Postal Service, facsimile, or our web site. You may send the Board an e-mail, or you may use the change of information form on the Board's web site to inform the Board of any

changed information.

Licensees who are categorized as "Inactive" may not practice dentistry or dental hygiene in any form whatsoever in the State of Mississippi until they have been approved to return to "Active" status. Also, if a licensee has been listed as "Inactive" for three (3) or more years and has not practiced his/her profession in another state or jurisdiction during that time, that licensee may be subject to a clinical assessment prior to his/her return to "Active" status.

Remember that if you practice either full-time or part-time in the State of Mississippi, you must be listed on "Active" status. Also, while on "Active" status, you must fully comply with all continuing education and CPR regulations of the Board. "Active" status has been defined as working one (1) day in any three (3) months of the preceding renewal period, and the months do not need to be consecutive.

NOTEWORTHY DATES



s the Mississippi State Board of Dental Examiners is a legislatively-mandated regulatory agency, its meetings are open to the public. However, due to the confidential and/or sensitive nature of certain aspects of the Board's business, the Board may vote to go into "Executive Session." Also, no items will be added to the agenda of any Board meeting as of one week prior to the date of that meeting. All meetings are held at Suite 100, 600 East Amite Street, Jackson, Mississippi; however, please call the office prior to any meeting to verify the correct date and time. You also may check the Board's web site (http://www.msbde.state.ms.us) to verify Board meeting and other dates by clicking the "Important Dates" button. The following dates have been tentatively set aside through July 2003 for Board meetings and the 2003 annual licensure examinations:

> July 19, 2002 September 13, 2002 November 1, 2002 December 6, 2002 January 10, 2003

February 28, 2003
March 28, 2003
May 9, 2003
May 10, 2003 (Examination Calibration Only)
May 19-20, 2003 (Dental Hygiene Examination)
May 20-22, 2003 (Dental Examination)
July 18, 2003

Please visit the Board's web site to familiarize yourself with upcoming dates for Board-approved radiology permit seminars. Seminars are offered through Gulf Coast Community College, Hinds Community College, Louisiana State University, Meridian Community College, Northeast Mississippi Community College, and Pearl River Community College. Remember that no one, other than a currently licensed Mississippi dentist or dental hygienist, may administer radiographs in the dental office without first obtaining a radiology permit from the Board.



CHANGES TO ANNUAL RENEWAL

nnual renewal is changing! At its July 19, 2002 Board meeting, the Board will amend Board Regulation 37 to change the current annual renewal period from "sixty (60) days prior to September 1 each year" to "sixty (60) days prior to November 1 each year." In effect, all licenses and permits will be renewed beginning September 1 each year. This change is being effected as a result of previously-mentioned changes to the Mississippi Dental Practice Act, §§ 73-9-19 and 73-9-43.

Many of you already may have noticed that you did not receive your customary annual renewal notice in the mail the first of July. You now should expect to receive your annual renewal notices by the first week of September each year. Also, the expiration date of August 31, 2002 noted on all certification cards during the 2001-2002 annual renewal has been extended until October 31, 2002 to accommodate this change in the renewal period. This information will be posted on the Board's web site as part of its database search feature. Also, the Board's office will assist you with confirmations of this renewal change for the various hospitals and Medicaid. Just give us a call, and we will be happy to communicate this change to the appropriate entity. Although the annual renewal period is changing, the continuing education period is NOT changing. The time period for continuing education will remain September 1 through August 31 of the following year.

In addition to changing the renewal period, the Board will be amending the renewal penalty period. Beginning November 1 each year, all licenses/permits not renewed by October 31 will fall into a two-month penalty period, and any licenses/permits not renewed by December 31 each year will be voided on January 1 for a failure to renew. Please keep these deadlines in mind when submitting your annual renewal. Furthermore, all licensees, regardless of age, will be required to pay the full annual renewal fee and the

Mississippi Recovering Dentists Program assessment, inasmuch as any renewal fee exemption due to age has been deleted from the Mississippi Dental Practice Act. Therefore, please remember that if you wish to continue to maintain a current license, you will be required to submit the appropriate renewal fee.

Licensees should be on the look-out for even further changes to renewal. Beginning September 1, 2003, the Board will be moving toward a bi-annual renewal cycle. In 2003, dentists will begin renewing on a bi-annual basis (2003 to 2005), and in 2004, dental hygienists and radiology permit holders will begin their bi-annual renewal (2004-2006). We will keep you advised as to these changes in future editions of the Dental Digest. Finally, the Board also is moving toward implementation of on-line license renewal, inasmuch as the State's E-Commerce portal is operational. As soon as these details are finalized, you will be notified via the Board's web site and subsequent editions of the Dental Digest. Don't forget to contact the Board's office if you have any questions regarding the renewal of your license or permit.



Top left to bottom right: Gene Norris Howell, Jr., D.D.S., Charles G. Purifoy, D.D.S., William T. O'Brien, III, D.D.S., D. Hal Jones, D.M.D., C. Wyck Neely, D.D.S., Thomas L. Jones, Jr., D.D.S., Stan T. Ingram, Esquire, Charles E. Leonard, D.D.S., Artis E. Knight, D.D.S., Catherine L. Gatewood, R.D.H., Mark H. Kennedy, D.D.S., and Ms. Leah Diane Howell.

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he following report on disciplinary actions covers the period December 7, 2001 through July 3, 2002. According to State law, investigations by the Board are confidential until official action is taken. The following is merely a summary of each disciplinary action taken and should not be interpreted as a complete statement of all facts and matters involved in each docket. Also, the Board typically includes several provisions in its orders which may not be summarized here. Although great care has been taken to ensure accuracy of the information provided hereafter, inadvertent errors may appear, and no entity should initiate an

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adverse action against a dentist, dental hygienist, or radiology permit holder based solely on the following information. Rather, the reader should request a copy of the Board's order (\$5.00 per copy) prior to making any decisions affecting licensees. Further, it should be noted that the names of persons herein provided may be similar to the names of persons who have not had disciplinary actions or corrective measures taken by the Board. A Consent Order is a negotiation between the Board and the licensee and is a procedure for resolution of a disciplinary action without the necessity of a formal hearing, and a voluntary surrender of a license has the same effect as a full revocation.

THIS INFORMATION HAS BEEN REMOVED FROM THE WEB VERSION OF THIS NEWSLETTER. ANYONE DESIRING INFORMATION ON DISCIPLINARY ACTIONS SHOULD CONTACT THE BOARD OFFICE BY E-MAIL, TELEPHONE, FACSIMILE, OR REGULAR MAIL.



\$\$\$ CURRENT MSBDE FEES \$\$\$

The following fees represent current amounts charged for applications, renewals, and other services rendered by the MSBDE. These fees are subject to change and must be paid by money order, personal check, or cashier's check in advance of any request.

Application for Dental License by Examination	\$400.00
Application for Dental Hygiene License by Examination	\$200.00
Application for Dental License by Credentials \$	2.000.00
Application for Dental Hygiene License by Credentials	\$500.00
	. \$25.00
Application for Specialty License	\$200.00
Application for General Anesthesia Permit	\$200.00
Application for I.V. Sedation Permit	\$200.00
Application for Radiology Permit (Includes Initial Renewal)	\$60.00
Annual Dental License Renewal	\$150.00
Annual Dental Specialty License Renewal	. \$75.00
Annual Dental Hygienist License Renewal	. \$75.00
Annual Dental Provisional License Renewal	\$150.00
Annual Dental Hygiene Provisional License Renewal	
Annual Radiology Permit Renewal	. \$20.00
Annual General Anesthesia Permit Renewal	\$100.00

Annual IV Sedation Permit Renewal \$100	
Duplicate License or Permit \$20	.00
Certification of Licensure or Permit Status \$20	.00
Certified Copy of License or Permit\$20	.00
Handling fee for Insufficient Funds Checks \$50	.00
Requests for Database Information	
Labels & Printouts	.00
Diskettes	.00
Radiology Examinations Administered in MSBDE Offices \$25	.00
One Copy of MSBDE Laws and/or Regulations \$10	.00
Additional Copies (Per Copy)\$5	.00
Additional Copies (Per Copy)	
Non-Notification of Change of Address \$10	.00
Disciplinary Orders (Per Copy)	
Newsletter (Per Copy)	.50

MSBDE NEWSLETTER

Suite 100 600 East Amite Street Jackson, MS 39201-2801



MISSISSIPPI STATE BOARD OF DENTAL EXAMINERS SUITE 100, 600 EAST AMITE STREET JACKSON, MS 39201-2801

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CHANGE OF ADDRESS NOTIFICATION

Pursuant to Miss. Code Ann. § 73-9-19, every licensed dentist and dental hygienist "shall immediately keep the board advised of any change in address of his office or residence." Additionally, Board Regulation 25, VI.A., stipulates that "[e]very person holding a radiology permit shall promptly keep the Board advised of any change of mailing address." Therefore, if you have changed your employer, home, business, mailing, or satellite address/telephone, please use this form to notify the MSBDE of such. Otherwise, keep this form in your files should you need to notify the MSBDE of a future change of information. You may cut along the dotted line, affix a postage stamp to the reverse side of this form, and mail it directly to the Mississippi State Board of Dental Examiners. If you wish, you may send this form via facsimile to (601)944-9624, or you may e-mail any changes via the Board's web site (http://www.msbde.state.ms.us). Please call (601)944-9622 if you have any questions.

Full Name:		MS License No.:				
Old Address:						
New Address:						
Telephone:	-		Effective Date of Change:			
Employer:						
Type of Change:	G Home Address	G Office Address	G Mailing Address	G Satellite Address		